

**Application Data Sheet****Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	METHOD OF MODULATION OF INTERACTION BETWEEN RECEPTOR AND LIGAND
Attorney Docket Number::	BOCK8
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	11
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No
<b>Applicant Information</b>	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Denmark
Status::	Full Capacity

Given Name:: Elisabeth  
Middle Name::  
Family Name:: BOCK  
Name Suffix::  
City of Residence:: Charlottenlund  
State or Province of Residence::  
Country of Residence:: Denmark  
Street of Mailing Address:: Tonysvej 20  
City of Mailing Address:: Charlottenlund

State or Province of Mailing Address::  
Country of Mailing Address:: Denmark  
Postal or Zip Code of Mailing Address:: DK-2920  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Ukraine  
Status:: Full Capacity

Given Name:: Vladimir  
Middle Name::  
Family Name:: BEREZIN  
Name Suffix::  
City of Residence:: Copenhagen N  
State or Province of Residence::  
Country of Residence:: Denmark  
Street of Mailing Address:: Nørrebrogade 223, 1.th.  
City of Mailing Address:: Copenhagen N

State or Province of Mailing Address::  
Country of Mailing Address:: Denmark  
Postal or Zip Code of Mailing Address:: DK-2200  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Denmark  
Status:: Full Capacity  
Given Name:: Morten

Middle Name::  
Family Name:: ALBRECHTSEN

Name Suffix::

City of Residence::

Charlottenlund

State or Province of Residence::

Country of Residence::

~~Denmark~~

Street of Mailing Address::

Holgersvej 15

City of Mailing Address::

Charlottenlund

State or Province of Mailing Address::

Country of Mailing Address::

Denmark

Postal or Zip Code of Mailing Address::

DK-2920

**Correspondence Information**

Correspondence Customer Number::

001444

**Representative Information**

Representative Customer Number::

001444

**Domestic Priority Information**

Application::

Continuity Type::

Parent

Parent Filing

Application::

Date::

This Application

National Stage of

PCT/DK2003/0009

12-18-03

01

**Foreign Priority Information**

Country::

Application Number::

Filing Date::

Priority Claimed::

Denmark

PA 2002 01982

12-20-02

Yes

Denmark

PA 2003 00330

03-03-03

Yes

**Assignment Information**

Assignee Name::

ENKAM Pharmaceuticals A/S

Street of Mailing Address::

Fruebjergvej 3

City of Mailing Address::

Copenhagen Ø

State or Province of Mailing Address::

Country of Mailing Address::

Denmark

Postal or Zip Code of Mailing Address::

DK-2100